Important Information Regarding Reinstatement Application for Land Surveyors

At its meeting on November 13, 2007, the State Board of Registration for Professional Engineers and Land Surveyors adopted a new policy regarding the license reinstatement of Professional Engineers and Land Surveyors.

Board Policy 07-02 is as follows:

All applicants seeking reinstatement of their registration following the license being administratively revoked for having an expired license for greater than 4 years shall be required to pass as a minimum the principles and practices examination, unless the applicant has continued their license in force from another acceptable jurisdiction without interruption and in compliance with current Continuing Education requirements for a licensed Georgia registrant during the time when the Georgia licensure was not active.

License Reinstatement Applicants should be aware that this application will be reviewed by the Board and if the applicant is determined to be eligible for reinstatement, one of the following options will be recommended and voted on at a Board meeting:

- If the applicant has maintained licensure in another jurisdiction without interruption, and otherwise meets continuing education requirements, there will be a \$1000 reinstatement fee assessed upon approval.
- If the applicant has not maintained licensure in another jurisdiction without interruption, and otherwise meets continuing education requirements, it will be necessary for the applicant to pass the Principles & Practices exam, for which the applicant will be given 4 offerings beginning with the next available offering. No additional Board fee will be assessed; however, the applicant will have to remit payment for the scheduling of the exam(s) to the exam administrator.

FOR BOARD USE ONLY
Amount Submitted
Date
Receipt #



FOR BOARD USE ONLY
Certificate Number
Date Issued
Applicant No

GEORGIA STATE BOARD OF PROFESSIONAL ENGINEERS & LAND SURVEYORS

237 Coliseum Drive • Macon, Georgia 31217 • (478) 207-2440

www.sos.ga.gov/plb/pels/

REINSTATEMENT APPLICATION FOR CERTIFICATE AS A LAND SURVEYOR

Application Fee \$100 (non-refundable)

License Type: LAND SURVEYOR

Additional License Types (currently or previously issued by the Georgia Professional Licensing Boards):

	License:			
as assired on	First	ľ	Middle	Last
Names as shown or	exam records or transcrip	ots (if different):		
	First		Middle	Last
Social Security Nu	mber:	Da	ate of Birth:	
Physical Address:	Number and Street P.O. Box not acceptable	Apt. No.	City/State	Zip
Mailing Address: _ (if different)	Number and Street	Apt. No.	City/State	Zip
Telephone Number Da	ay Telephone Nun	nber Evening	E-Mail Address	
Affiliation: Name of firm				
Physical Address:				

NOTE TO APPLICANT: This information will be entered into the Division database for Accounting and Licensing purposes. All items must be completed, and then duplicated on the next page of the application for Board review.

APPLICATION FOR REINSTATEMENT AS A LAND SURVEYOR (License that has expired for more than 4 years. If your license expired less than 4 years ago, you may renew online.)

Section 1: General Info	rmation		Date:/_	/
Name:				
First	Middle	Maiden	Las	st
*THIS INFORMATION IS AU	Birthp JTHORIZED TO BE OBTAINED 19-11-1 & O.C.G.A. § 20-3-295	& DISCLOSED TO STATE &	FEDERAL AGENC	//_ HES
Mailing Address:	Street and Number	City		State and Zip
Permanent Address:				
	Street and Number	City		State and Zip
Business Phone: ()	Home Phone: ()		
Have you practiced surved did so without a current li	eying on a project within the scense?	State of Georgia where a li No If yes, include comple	cense was require te details on addit	ed, but you
Present Position (your titl	e):			
Company Name:	Co	ompany Address:		
Have you ever been conv details on additional shee	victed or pled nolo contender et.	re to a crime? □ Yes □ No	If yes, include o	omplete
Section 2: Registration				
Lapsed Georgia Land Su	rveyor License number:			
Expiration Date of your m	nost recently lapsed Georgia	License:		
Has a professional licens	e from any jurisdiction been	revoked, suspended or sar	nctioned? Yes	□ No
Name all the jurisdictions	(states or territories) where	you have been granted a L	and Surveyor lice	ense:
Name all the jurisdictions (Provide verification of lic	where you have maintained ense in <u>current</u> state of resi	an uninterrupted Land Sur dence.):	rveyor license(s)	-
Name all jurisdictions who	ere you no longer maintain a	current professional licens	se for whatever re	ason:

Revised 07-12

SECTION 3: EXPERIENCE * EXPERIENCE SINCE YOUR GEORGIA LICENSE WAS REVOKED *

SHADED AREAS ARE FOR BOARD USE ONLY

School:		Degree/Date		ABET:	Yes 1	No
Masters:		Degree/Date		ABET:	Yes I	No
Technolo	pgy:	Degree/Date		ABET:	Yes I	No
Other: _		Degree/Date		ABET:	Yes !	No
LSIT Sta	te & Date:	LS State & Date:				
Eng. #	Company/ Employer Name		Your Title	From: <u>Mo/Yr</u>	To: <u>Mo/Yr</u>	Total Months
Total # of E	Endorsement Forms: (All Engagements	MUST be endorsed.)				
NOTES:						

SECTION 4: CONTINUING EDUCATION 1

Course Title ²	Date Completed	Number of PDHs Acquired ³
	-	

Notes

¹ See Board Rules, Chapter 180-11.

² Attach proof of completion of all coursework listed.

³ PDHs must have been earned in the last four (4) years with 7.5 or more earned within the last two (2) years.

SECTION 6: ENDORSEMENT FORM

Section 6A – To Be Completed By Applicant for LS Reinstatement

Applicant N	lame:							
		Last			First		Middle	Maiden
Engageme	nt No. as list	ted in Section 3:						
This endors	sement is fo	r: Reference &	Experience	e Verificati	ion 🗆	Reference Only	Employment Ve	erification Only
applicant	by blood o		nom at lea	ast three	shall be re			e persons, not related to the g personal knowledge of the
Experience	described of	on this form was of	otained whi	ile employ	ed by:		O Name	
							Company Name	
Address				Ci	ity	State	Zip Code	County
For this en	gagement pl	ease provide nam	e of direct	superviso	r:			
Was your c	lirect superv	isor a registered L	s? [☐ Yes	□ No	Other:		
Endorsor fo	or this Engag	gement:						
LIIdoisei id	Ji tilis Eligaç	gement						
personal progress judgmen	ly performe <u>sive</u> in diffic t may be tro	ed in design, stu ulty and magnitu	dy, reviev de; reflect involving	v, testing t the acqu g public h	or other to uired ability nealth and	asks which required to design and apply	your surveying s surveying principl	first person the work you skills. This work should be les to demonstrate that your ct lists. Experience must be
Da	ites	Engagem No.	ent					
From	То							
Mo/Yr	Mo/Yr							
	Type of Exp	erience	%					
	Surveying, & calculation							
Topograp	hic or As-Bu	uilt Surveying						
Geodetic	or GPS Sur	veying						
Construct	tion Lay-Out	/Staking						
Other				-				
				lf y	ou need add	ditional space, please a	attach additional she	ets.
						ompleted by End in Section 6A ab		
☐ Accur	ate 🗌 Ir	naccurate (Expla			-			
Were you t	he applicant	's direct superviso	r for this er	ngagemen	it?			☐ Yes ☐ No
If direct sup	pervisor, wer	re you a registered	Land Surv	veyor?	☐ Yes ☐	No State Register	ed/No.:	
Date of	of Issue:				Si	gned:		

Section 6C - To Be Completed by Endorser

The Georgia Board prefers that you mail this form back to the applicant in the applicant's enclosed pre-addressed stamped envelope. Seal the envelope and sign the back flap to ensure against tampering. If you prefer to mail the form directly to the Board office at 237 Coliseum Drive, Macon, GA 31217-3858, please make a blank copy of this form and mail it back to the applicant following the directions above, then mail the completed form to the Board. All responses will be held in strictest confidence by the Board.

Nan	ne of Applicant:							
1a.	How well do you kno	w the applicant:	□ very	v well □ we	ell 🗌 slightly	☐ not at all		
1b.	List dates (months ar	• •	•		•			
	,	,			Mo. & Yr.		Mo. & Yr.	
1c.	Basis of contact:	☐ As the applica	nt's LS supe	rvisor	☐ As an assoc	iate or co-worke	in Surveying Work	
	☐ Other (explain) _		·		☐ Are you rela		_	□ No
	□ Other (explain) _				L Ale you lea	ica by blood of f	iamage: — res	□ 1 10
2.	Do you have persona	al knowledge of the	applicant's	surveying work?	☐ Yes [• •	complete entire form.	& 1O
3.	What is your opinion	of the applicant's p	ersonal integ	grity and reputation	on:	•		
4.	Would you employ ap	oplicant in a positio	n of trust:	☐ Yes ☐	☐ No If no, exp	lain:		
5. U	Jsing the interpretations	below, please rate	the practice	and quality of pe	erformance of the	applicant's engir	eering work.	
	Type of Practice	Responsib	le Charge	Above	Average	Below	Unsatisfactory	Unknown
Bound	dary Surveying	Yes	No □	Average □		Average		
	graphic or As-Built Surve							
	etic or GPS Surveying							
	ruction Lay-Out/Staking	_						
Average Below A Unsatis Unknow	ge: Work not workable Average: Performa sfactory: Work of p Inadequa wn: Did not re	maps and/or analysis nce needs careful che coor quality, not up to te for "the purpose of eview work or work wit	ntent or level, s. ecking and rath minimum prof safeguarding I th applicant in	but adequate for a ner close supervision fessional standards ife, health and properthis area. Can not	surveying purposes on to meet requireme s. Requires review perty." determine proficience	indicating an abil ents. and revision by as: cy.	ty, under some supervi	pefore execution
	Considering the need to and responsibility:	protect the public r	nealth, safety	and welfare, in	your opinion now	does this applica	ant rank in profession	al competenc
	☐ Qualified	□ Addition	nal Experiend	ce Needed	□ Unq	ualified		
7. R	REMARKS: The Board capabilities, or limitations	d will appreciate a s, if any. Use rever	ndditional info se side for co	ormation or amount continuation of co	olifying information mments, if necess	on regarding the sary.	applicant's surveyir	ng experience
9. B	Based on the definition o	of the practice of su	rveying, Geo	orgia Law 43-15-2	2(11), do you reco	mmend the app	icant for LS licensure	?
								l Yes □ No
u a	certify that the above inqualified applicant to land property is concerned in Name:	become licensed b						
	FIF	RST		MI			LAST	
S	State of LS License/Num	nber:		Dat	e Issued:			
Р	Present Position:			Fir	m:			
	Address:							
D	Daytime telephone numb	per :() _						
S	Signature:					1	SEAL	
D	Date:					(SEAL)	
If	f licensed, please verif	y with Land Surve	eyor seal wi	th signature.				

SECTION 5: AFFIDAVIT BY APPLICANT

belief. I further swear and affirm that I have	read and understa	s application is true and correct to the best of my knowledge and and the current state laws and rules and regulations of the Georgia and Surveyors, and I agree to abide by these laws and rules, as
By signing this application, electronically or pursuant to O.C.G.A. § 50-36-1:	r otherwise, I here	by swear and affirm one of the following to be true and accurate
		r. Please submit a copy of your current Secure and Verifiable ument as indicated on page 10 of the application.
am a qualified alien or non-immigrant under number issued by the Department of Homel	the Federal Immi and Security or of	rmanent resident of the United States 18 years of age or older, or ligration and Nationality Act 18 years of age or older with an alien her federal immigration agency. Please submit a copy of your ur Alien number or your I-94 number and, if needed, SEVIS
		to make full and accurate disclosures may result in disciplinary nal Engineers and Land Surveyors and/or criminal prosecution.
Sworn to before me this	day of	, (year)
State of Georgia, County of		
(Signature of App	licant)	(Date)
(Notary Public)		NOTARY SEAL (Required)

My Commission Expires:__



OFFICE OF SECRETARY OF STATE

PROFESSIONAL LICENSING BOARDS DIVISION 237 Coliseum Drive Macon, Georgia 31217 (478) 207-2440

CONSENT FORM

I hereby authorize the Board of Registration for Professional Engineers and Land Surveyors ("Board") to receive any Georgia criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

jacaco agono, ar oco.	giai				
Full Name (Print)					
Physical Address	(P.O. Boxes	NOT Accepted)			
Sex	Race	Date of Birth	Social Sec	urity Number	
I,	on is valid for 90	0/180/ (circle one) days	consent to the		n periodic criminal
Signa	ture of Applicar	nt	-	Date	
Special licensure prov	risions (check if	applicable):			
Working with me Working with eld Working with chi	ler care				

APPLICANT: PLEASE CHECK THE FORM OF IDENTIFICATION BELOW THAT YOU POSSESS. RETURN THIS FORM ALONG WITH A COPY OF YOUR APPROPRIATE DOCUMENTATION.

Name		

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2 Issued August 1, 2011 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 ("IIREA") provides that "[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law's website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General." O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

basis, if necessary.
The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.
A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at: http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. §50-36-2(b)(3); 22 CFR § 41.2]
A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]